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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/657986

Total Fee Calculation

•	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	•	Total
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Bude Filing Fee	2017(0)	·			345	690	•	690
Total Claims >20	203 103	15-20-	0_	Х	9	13	٠.	
Independent Claums >]	202/102	<u> 10</u> -3-	1	X	39	13	- -	546
Mult. Dep Claim Present	204.104		·		130	260	_	
Surcharge	205/105				65	130		130
English Translation	139					·		
TOTAL FEE CALCULA	TION							 1366

Fees due upon filing the application

Total Filing Fees Due =

5 <u>1366</u>

Less Filing Fees Submined

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BALANCE DUE

.s 1366

Office of Initial Patent Examination

Ligure 7

FORM OIPE-RAM-01 (Rev. 12/97)

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Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [**SMALL ENTITY** OR FOR **NUMBER FILED NUMBER EXTRA** FEE RATE RATE FEE **BASIC FEE** 345.00 690.00 OR minus 20= TOTAL CLAIMS X\$ 9= X\$18=OR INDEPENDENT CLAIMS minus 3 = X39 =X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130 =+260= OR * If the difference in column 1 is less than zero, enter "0" in column 2 **TOTAL** OR TOTAL CLAIMS AS AMENDED - PART II **OTHER THAN SMALL ENTITY SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-**REMAINING** NUMBER **PRESENT** TIONAL RATE TIONAL RATE PREVIOUSLY AMENDMENT **AFTER EXTRA** FEE **FEE** AMENDMENT PAID FOR Total Minus X\$ 9= X\$18= OR Independent Minus X78= X39 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI--ADDI-REMAINING NUMBER PRESENT TIONAL **TIONAL** RATE RATE **PREVIOUSLY** AMENDMENT **AFTER EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus = X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL **TIONAL RATE RATE AMENDMENT** AFTER **PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$18= X\$ 9= OR Independent Minus X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130 =+260= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.